

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 116

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Footlik for Congress

**A.** Full Name (Last, First, Middle Initial)  
Chaim Kaminetzky  
Mailing Address 71-41 171 STREET

City State Zip Code  
Flushing NY 11365

FEC ID number of contributing federal political committee.

C

Name of Employer  
HIGHLAND CARE CENTEROccupation  
EXECUTIVE

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 7

Transaction ID: C3907904

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Andrew/Patricia Kant  
Mailing Address 2240 Looscan Lane

City State Zip Code  
Houston TX 77019-1414

FEC ID number of contributing federal political committee.

C

Name of Employer  
KSF ORTHOPAEDIC ASSOCIATESOccupation  
ORTHOPAEDIC SURGEON

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 9 / 2 0 0 7

Transaction ID: C3881786

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Peter A Kant  
Mailing Address 1530 Wilson Blvd  
Suite 170

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee.

C

Name of Employer  
Rapiscan SystemsOccupation  
Vice President

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 5 / 2 0 0 7

Transaction ID: C3901572

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....